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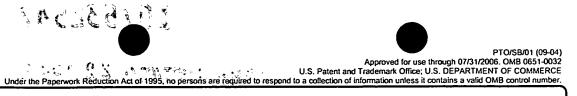
_		Attorney Docket Numb	er	EX03-075C-US		
DECLARATION FOR UTILITY OR				Plowman, et al		
PATENT APPLICATION (37 CFR 1.63)		COMPLETE IF KNOWN				
		Application Number New/				
☐Declaration ☐Declaration Submitted OR Submitted after Initial		Filing Date	Here	ewith		
With Initial Filing (su	Filing (surcharge	Art Unit				
	required)	Examiner Name				
	DES T AF 7 CF	DESIGN T APPLICATION 7 CFR 1.63) Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))	TAPPLICATION TOTAL CONTROL CON	T APPLICATION 7 CFR 1.63) Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) Application Number New Art Unit First Named Inventor COMP Application Number New Art Unit		

I hereby declare that:										
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.										
I believe the inventor(s) nan	ned below to be the original an	d first inventor(s) of the subje	ct matter which is o	claimed and for wh	nich a patent					
MBMS AS MODIFIERS OF BRANCHING MORPHOGENESIS AND METHODS OF USE										
the specification of which	(Title of th	e Invention)								
is attached hereto										
OR										
was filed on (MM/DD	^{//YYY)} 10/22/2003	as United States Ap	plication Number o	r PCT Internation	al					
Application Number	PCT/US03/33549 and	was amended on (MM/DD/Y	YYY)	(i	f applicable).					
I hereby state that I have revamended specifically referre	viewed and understand the cod to above.	ontents of the above identif	ied specification, i	ncluding the clai	ms, as					
continuation-in-part applicati	sclose information which is mions, material information whional filing date of the continu	ich became available betwe	efined in 37 CFR een the filing date	1.56, including fo of the prior appli	or cation and					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy	Attached?					
Mulliber(5)	Country	(11111/20/1111/		YES	NO					
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										

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[Page 1 of 2]
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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	t all correspondence to: Customer Number				OR	Correspondence addres	ss below	
Name								
Address	_		-					
City	State				Z	IP		
Country	-		Telepho	one		Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:			A petiti	on has	been filed	for this unsigned inventor		
Given Name (first and middle [if any]) GREGORY D.	. 1		Family Name or Surname PLOWMAN					
Inventor's Signature					Date			
Residence: City SAN CARLOS	State CA			Count	ry	Citizenship US		
Mailing Address 35 WINDING WAY	•							
City SAN CARLOS	State CA			Zip 94070		Country US		
NAME OF SECOND INVENTOR:			A petiti	on has	been filed	for this unsigned inventor		
Given Name (first and middle [if any]) FELIX D.			Fami KARI	-	e or Surna	ame		
Inventor's Signature		·		·	Date			
Residence: City WALNUT CREEK	State CA			Count US	ry	Citizenship US		
Mailing Address 732 LAUREL DRIVE	1			•				
City WALNUT CREEK	State CA	. "		Zip 94596		Country US		
Additional inventors or a legal representative are being no	amed on t	ne <u>7</u> sur	plementa	I sheet(s) PTO/SB/0:	2A or 02LR attached hereto.		

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 7

Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
CANDACE			s	WIMMER				
Inventor's Signature						Date		
Residence: City	SAN FRANCISCO	CA State	Cou	US		US Citizenship		
Mailing Address	1064 CAROLINA ST	REET						
Mailing Address								
City SAN FRANCISCO		CA State	ZIP	94107	Cou	US ntry		
Name of Addition	al Inventor, if an	у		A petition has been filed for this unsigned inventor				
Given	Name (first and middle	(if any))		Family Name or Surname				
HINRICH ALEXANDER			н	HABECK				
Inventor's Signature						Date		
Residence: City		State	Cou	Intry DE		Citizenship DE		
Mailing Address	GERTRUD-BAEUME	ER-STR. 74						
Mailing Address	72074 TUEBINGEN	·						
City	S	tate	Zip		Cou	ntry DE		
Name of Addition	al Inventor, if any	y		☐ A petition has been filed for this unsigned inventor				
Given	Name (first and middle	[if any])		Family Name or Surname				
THOMAS I.			K	OBLIZEK.				
Inventor's Signature						Date		
Residence: City		State	Cou	intry DE	-	Citizenship DE		
Mailing Address	GECHTSTR. 31				•			
Mailing Address	72074 TUEBINGEN							
City	-	State		Zip	Cou	untry DE		

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Name of Additional Inventor, if any			☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])			Family Name or Surname				
STEFAN			CHULTE-MERKER				
Inventor's Signature					Date		
Residence: City	State	Cou	DE untry		DE Citizenship		
Mailing Address KRONENSTR. 17							
Mailing Address 72070 TUEBINGE	N						
City	State	ZIP		Cou	DE ntry		
Name of Additional Inventor, if a	ny		☐ A petition has been filed for this unsigned inventor				
Given Name (first and midd	fle [if any])	Family Name or Surname					
ULRIKE			LANGHEINRICH				
Inventor's Signature					Date		
Residence: City	State	Cou	ıntry		Citizenship		
Mailing Address DERENDINGER S	TRASSE 104	•		•			
Mailing Address 72072 TUEBINGE	N						
City	State	Zip		Cou	ntry DE		
Name of Additional Inventor, if a	ny	☐ A petition has been filed for this unsigned inventor					
Given Name (first and midd	lle [if any])	Family Name or Surname					
GORDON MARK		s	тотт				
Inventor's Signature					Date		
Residence: City	State	Cou	Intry DE		DE Ditizenship		
Mailing Address QUENSTEFTSTRA							
Mailing Address 72076 TUEBINGE	N						
City	State		Zip	Cot	untry DE		

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Name of Additional Inventor, if any			A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])			Family Name or Surname				
TORSTEN	ie jii ariyj)	-	TROWE	311my	Hame or Garname		
Inventor's							
Signature					Date		
Residence: City	State		DE Country		DE Citizenship		
Mailing Address IM WAEGNER 23							
Mailing Address 72076 TUEBINGE	N						
City	State	z	ZIP	Со	DE untry		
Name of Additional Inventor, if any			☐ A petition has been filed for this unsigned inventor				
Given Name (first and midd	le [if any])		Family Name or Surname				
ANDREAS MICHAEL			VOGEL				
Inventor's Signature					Date		
Residence: City	State	\top_{c}	Country		Citizenship		
Mailing Address LINSENBERGSTR	ASSE 12						
Mailing Address 72074 TUEBINGE	ı						
City	State	Z	Zip	Co	untry DE		
Name of Additional Inventor, if a	ıy		☐ A petition has been filed for this unsigned inventor				
Given Name (first and midd	le [if any])		Family Name or Surname				
JOERG HEINRICH			ODENTHAL				
Inventor's Signature					Date		
Residence: City	State	C	Country DE		Citizenship DE		
Mailing Address OTTO-ERBE-WEG	Address OTTO-ERBE-WEG 18						
Mailing Address 72070 TUEBINGE	1						
City	State		Zip	C	ountry DE		

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Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor					
Given	Name (first and middle	(if any))		Family Name or Surname					
JOCHEN KONRAD				SCHEEL					
Inventor's Signature							Date		
Residence: City		State	c	Country	DE		DE Citizenship		
Mailing Address	EDUARD-SPRANGE	ER-STRASSE 72			_				
Mailing Address	72076 TUEBINGEN								
City		State	z	ZIP Cou			DE ountry		
Name of Addition	al Inventor, if any	/		☐ A petition has been filed for this unsigned inventor					
Given	Name (first and middle	[if any])		Family Name or Surname					
TORSTEN TILMANN				WILL					
Inventor's Signature							Date		
Residence: City		State	c	ountry	DE		Citizenship DE		
Mailing Address	EICHENWEG 2			_					
Mailing Address	72076 TUEBINGEN								
City	St	ate	z	ip		Cou	untry DE		
Name of Addition	al Inventor, if any	<i>'</i>		☐ A petition has been filed for this unsigned inventor					
Given	Name (first and middle	[if any])	Family Name or Surname						
YISHENG				JIN					
Inventor's Signature							Date		
Residence: City	SAN MATEO	State CA	С	ountry	US		Citizenship		
Mailing Address	192 36 TH AVENUE, A	APT. B							
Mailing Address									
City	SAN MATEO	State CA		Zip	94403	Co	untry		

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Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
LYNN MARGARET			Ε	SJERKE				
Inventor's Signature							Date	
Residence: City	SAN FRANCISCO	CA State	Co	untry	US		US Citizenship	
Mailing Address	2875 21ST STREET	Г, #17 ————————————————————————————————————						
Mailing Address								
City SAN FRANCISCO		CA State	ZIP	941	10	Cou	US untry	
Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given	Name (first and middle	e [if any])			Fa	mily	Name or Surname	
BING			۱	IAI				
Inventor's Signature							Date	
Residence: City	LOS ALTOS	State CA	Co	untry	US		Citizenship CN	
Mailing Address	660 TEMPLEBAR V	/AY						
Mailing Address			-					
City	LOS ALTOS S	tate CA	Zip	940)22	Cou	untry US	
Name of Addition	al Inventor, if an	у		☐ A petition has been filed for this unsigned inventor				
Given	Name (first and middle	e [if any])			Fa	mily l	Name or Surname	
JOANNE I.			А	ADAMKEWICZ				
Inventor's Signature							Date	
Residence: City	SAN FRANCISCO	State CA	Co	untry	us		Citizenship US	
Mailing Address	1249 RHODE ISLAN	ND STREET						
Mailing Address								
City	SAN FRANCISCO	State CA		Zip	94107	Co	ountry	

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Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given	Name (first and middle	e (if any])		Family Name or Surname				
KIM				ICKETEIG				
Inventor's Signature						Date		
Residence: City	SAN FRANCISCO	CA State	Co	US untry		US Citizenship		
Mailing Address	1921 GROVE STRE	ET						
Mailing Address								
City SAN FRANCISCO		CA State	ZIF	94117	Co	US untry		
Name of Addition	al Inventor, if an	у		A petition has been filed for this unsigned inventor				
Given	Name (first and middle	e [if any])		Family Name or Surname				
R. GLENN R.			-	HAMMONDS				
Inventor's Signature						Date		
Residence: City	BERKELEY	State CA	Со	untry US		Citizenship US		
Mailing Address	7036 NORFOLK RO	AD						
Mailing Address								
City	BERKELEY S	tate CA	Zip	94705	Cot	untry US		
Name of Addition	al Inventor, if an	у		☐ A petition has been filed for this unsigned inventor				
Given	Name (first and middle	e [if any])		Family Name or Surname				
CRAIG D.				AMUNDSEN				
Inventor's Signature						Date		
Residence: City	PACIFICA	State CA	Co	untry US		Citízenship US		
Mailing Address	31 ALVISO COURT							
Mailing Address								
City	PACIFICA	State CA		Zip 94044	Co	ountry		

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Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
HAIGUANG		-	z	HANG				
Inventor's Signature						Date		
Residence: City	EL SOBRANTE	CA State	Cou	US untry		US Citizenship		
Mailing Address	4833 EL GRANDE	PLACE						
Mailing Address								
City EL SOBRANTE		CA State	ZIP	94803	Co	US		
Name of Additiona	I Inventor, if ar	пу		☐ A petition has been filed for this unsigned inventor				
Given N	lame (first and midd	e [if any])		Family Name or Surname				
MONIQUE			N	IICOLL				
Inventor's Signature						Date		
Residence: City	PACIFICA	State CA	Cou	untry US		Citizenship US		
Mailing Address	224 NAOMI AVENU	JE						
Mailing Address	.,							
City	PACIFICA	State CA	Zip	94044	Co	untry US		
Name of Additiona	I Inventor, if ar	ıy		☐ A petition has been filed for this unsigned inventor				
Given N	Name (first and midd	e [if any])		Family Name or Surname				
Inventor's Signature						Date		
Residence: City	Residence: City State 0			Country Citizenship				
Mailing Address								
Mailing Address								
City		State		Zip	Co	ountry		

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